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Attorney's Docket No.: 06275-294001 / LDG/Z70433-1P US

5 Rec'd PCT/PTO 09 SEP 2002  
9/9/02  
161

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Rakesh Anand et al.

Art Unit : 1645

Serial No. : 09/857,129

Examiner : Unknown

Filed : August 24, 2001

Title : USE OF FACTOR X POLYMORPHISM IN THE DIAGNOSIS AND  
TREATMENT OF FACTOR X AND/OR FACTOR XA MEDIATED DISEASES

Commissioner for Patents  
Washington, D.C. 20231

REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Please correct the Filing Receipt for the above-referenced application to amend the inventor's name from "John En Morten" to read --**John E. N. Morten**--. Enclosed is a copy of the executed Combined Declaration and Power of Attorney in which the inventor's handwritten signature reflects the correct spelling of the inventor's name. Also, please amend the Attorney Docket Number from "P-280348" to read --**06275-294001**--. For your convenience, the desired changes are indicated in red ink on the enclosed copy of the Filing Receipt.

Kindly supply a corrected Filing Receipt to the undersigned.

CERTIFICATE OF MAILING BY FIRST CLASS MAIL

I hereby certify under 37 CFR §1.8(a) that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage on the date indicated below and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

Date of Deposit

August 29, 2002

Signature

Joanne D Boyle  
JOAnne D Boyle

Typed or Printed Name of Person Signing Certificate

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Applicant : Rakesh Anand et al.  
Serial No. : 09/857,129  
Filed : June 1, 2001  
Page : 2

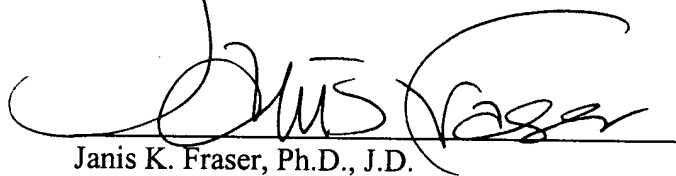
Attorney's Docket No.: 06275-294001 / LDG/Z70433-  
1P US

No fee is believed to be due. If, however, there are any charges or credits, please apply them to Deposit Account No. 06-1050.

Respectfully submitted,

Date:

Aug. 29, 2002



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/857,129	08/24/2001	1645	1500	P-280348 06275-294001		12	6

00909  
PILLSBURY WINTHROP, LLP  
P.O. BOX 10500  
MCLEAN, VA 22102



CONFIRMATION NO. 9676  
FILING RECEIPT  
\*OC000000007737082\*

Date Mailed: 04/03/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

E.N. — Rakesh Anand, Macclesfield, UNITED KINGDOM;  
John En Morten, Macclesfield, UNITED KINGDOM;  
John C. Smith, Macclesfield, UNITED KINGDOM;

Domestic Priority data as claimed by applicant

THIS APPLICATION IS A 371 OF PCT/GB99/03973 11/30/1999

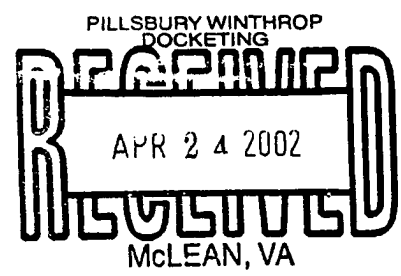
Foreign Applications

UNITED KINGDOM 9826747.9 12/05/1998

Projected Publication Date: Not Applicable, filed prior to November 29,2000

Non-Publication Request: No

Early Publication Request: No



Title

Use of factor x polymorphism in the diagnosis and treatment of factor x and/or factor xa mediated diseases

Preliminary Class  
435

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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CIP/PCT NATIONAL/PLANT  
ORIGINAL/SUBSTITUTE/SUPPLEMENTAL  
DECLARATIONS

RULE 63 (37 C.F.R. 1.63)  
DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PW  
FORM  
270433/UST

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name, and I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the **INVENTION ENTITLED USE OF FACTOR X POLYMORPHISM IN THE DIAGNOSIS AND TREATMENT OF FACTOR X AND/OR FACTOR XA MEDIATED DISEASES**

the specification of which (CHECK applicable BOX(ES))  
X A. ☐ is attached hereto.  
BOX(ES) → B. ☐ was filed on \_\_\_\_\_ as U.S. Application No. \_\_\_\_\_

→ C. ☒ was filed as PCT International Application No. PCT/GB99/03973 on 30 November 1999 (30.11.1999) and (if applicable to U.S. or PCT application) was amended on \_\_\_\_\_ I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose all information known to me to be material to patentability as defined in 37 C.F.R. 1.56. Except as noted below, I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International Application which designated at least one other country than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate, or PCT International Application, filed by me or my assignee disclosing the subject matter claimed in this application and having a filing date (1) before that of the application on which priority is claimed, or (2) if no priority claimed, before the filing date of this application:

PRIOR FOREIGN APPLICATION(S) Number	Country	Day/MONTH/Year Filed	Date first laid- open or Published	Date Patented or Granted	Priority NOT Claimed
9826747.9	GB	05 December 1998			

Except as noted below, I hereby claim domestic priority benefit under 35 U.S.C. 119(e) or 120 and/or 365(c) of the indicated United States applications listed below and PCT international applications listed above or below and, if this is a continuation-in-part (CIP) application, insofar as the subject matter disclosed and claimed in this application is in addition to that disclosed in such prior applications, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in 37 C.F.R. 1.56 which became available between the filing date of each such prior application and the national or PCT international filing date of this application:

PRIOR U.S. PROVISIONAL, NON PROVISIONAL AND/OR PCT APPLICATION(S) Application No. (series code/serial no.)	Date/MONTH/Year Filed	Status Pending, abandoned, patented	Priority NOT Claimed
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 16 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint Pillsbury Winthrop LLP, Intellectual Property Group, telephone number (202)861-3000 (to whom all communications are to be directed), and persons of that firm who are associated with USPTO Customer No. 909 (see below label) individually and collectively my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent, and I hereby authorize them to delete from that Customer No. names of persons no longer with their firm, to add new persons of their Firm to that Customer No., and to act and rely on instructions from and communicate directly with the person/assignee/attorney/firm/organization who/which first sends/sent this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instruct the above Firm and/or an attorney of that Firm in writing to the contrary.

00909

(1) INVENTOR'S SIGNATURE

*Rakesh Anand*

Date: 11<sup>th</sup> Mar 2001

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Mailing Address	Alderley Park, Macclesfield, Cheshire, SK10 4TG, United Kingdom				
(include Zip Code)					

(2) INVENTOR'S SIGNATURE

*John E. N. Morten*

Date: 3/5/2001

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Residence	Macclesfield	Cheshire	United Kingdom	State/Foreign Country	Country of Citizenship
Mailing Address	Alderley Park, Macclesfield, Cheshire, SK10 4TG, United Kingdom				
(include Zip Code)					

☒ OR ADDITIONAL INVENTORS see attached page.

☐ See additional foreign priorities on attached page (incorporated herein by reference).

Atty. Dkt. No. P (M#)

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DECLARATION AND POWER OF ATTORNEY  
(continued)  
Additional Inventors

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(3) INVENTOR'S SIGNATURE

Date:

May 9th 2004

Name	JOHN	John	C	C	SMITH	Smith
	First	Middle Initial	Family Name			
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	City	State/Foreign Country	Country of Citizenship			
Mailing Address	Alderley Park, Macclesfield, Cheshire, SK10 4TG, United Kingdom					
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(4) INVENTOR'S SIGNATURE

Date:

Name				
	First	Middle Initial	Family Name	
Residence				
	City	State/Foreign Country	Country of Citizenship	
Mailing Address				
(include Zip Code)				

(5) INVENTOR'S SIGNATURE

Date:

Name				
	First	Middle Initial	Family Name	
Residence				
	City	State/Foreign Country	Country of Citizenship	
Mailing Address				
(include Zip Code)				

(6) INVENTOR'S SIGNATURE

Date:

Name				
	First	Middle Initial	Family Name	
Residence				
	City	State/Foreign Country	Country of Citizenship	
Mailing Address				
(include Zip Code)				

(7) INVENTOR'S SIGNATURE

Date:

Name				
	First	Middle Initial	Family Name	
Residence				
	City	State/Foreign Country	Country of Citizenship	
Mailing Address				
(include Zip Code)				

(8) INVENTOR'S SIGNATURE

Date:

Name				
	First	Middle Initial	Family Name	
Residence				
	City	State/Foreign Country	Country of Citizenship	
Mailing Address				
(include Zip Code)				

(9) INVENTOR'S SIGNATURE

Date:

Name				
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Residence				
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Mailing Address				
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